No. C 146259		Due no later than Nov 30, 2013		2. Registe	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form 1. Mailing Address: Correct in this box if needed. BRYCE A. BURTENSHAW, D.D.S., P.A. LISA M BURTENSHAW 1544 DELMAR CIRCLE IDAHO FALLS ID 83404			BRYCE A BURTENSHAW DDS 200 N WOODRUFF IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE								
				5. <u>New</u> No				
4. Corporations: Enter N	lames and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Trea	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	LISA M BURTENSHAW		1544 DEL MAR CIRCLE	IDAHO FA	ALLS ID	UNITED STATES	83404	
PRESIDENT	BRYCE A. B	URTENSHAW	1544 DEL MAR CIRCLE	IDAHO FA	ALLS ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 146259		Signature: Lisa Burtenshaw			Date: 11/03/2013			
		Name (type or print): Lisa Burtenshaw			Title: Secretary			
Processed 11/03/2013		* Electronically provided signatures are accepted as original signatures.						